PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number	
00/000 - 711	,

								15/1/8/20-5/9					
CLAIMS AS FILED - PART I (Column 1) (Column 1)						umn 2)		MALL E	NTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			53				ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	ASIC FEI	+	OR	BASIC FEE		
TO	OTAL CHARGE	ABLE CLAIMS	63 minus 20=		• 43			X\$ 9=	197	OR	X\$18=	<u> </u>	
INDEPENDENT CLAIMS			14 n	ninus 3 =	. (X40=	40	OR	X80=		
M	ULTIPLE DEPE	NDENT CLAIM P	PRESENT		9		-	+135=		1			
• 1	f the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL	135	OR OR	+270= TOTAL		
9/23/0 CLAIMS AS AMENDED - PART II								TOTAL	1.4	JON	1		
_	110707	(Column 1)	(Column 2) (Column 3)				SMALL ENTITY			OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMB PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 42	Minus	6	3	= 8		X\$ 9=)	OR	X\$18=	/	
	Independent	. 4	Minus		9	= 1		X40=		OR	X80=		
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+135 =	1	OR	+270=		
							<u> </u>	TOTAL		OR ,	TOTAL		
		(Column 1)		(Colum	nn 2)	(Column 3)	AU	DIT. FEE		, ,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	·	Minus	••		=		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	PENDENT	CLAIM	-		X40=		OR	X80=		
	1	and the state of the	Je ee De	LINDLIN	CCAIN		+	135=		OR	+270=		
							ADI	TOTAL DIT. FEE		OR A	TOTAL ADDIT: FEE		
		(Column 1)		(Colum		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus			=	\[\frac{1}{2}\]	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	•••		п		(40=		ŀ	X80=		
_	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM			`		OR	700=		
٠,	If the entry in colu	mn 1 is less than th	ie entry in coli	imn 2 write '	"N" in coli	ımn 3	+	135=		OR	+270=		
•••	If the "Highest Nul If the "Highest Nu	mber Previously Pa mber Previously Pa iber Previously Pai	ud For [*] IN THI aid For [*] IN TH	S SPACE IS	less than	20, enter "20 " 3, enter "3 "		TOTAL IT FEE			TOTAL DOIT FEE		
	The regulation		2.0. (10000	epender		giresi number	-00:10	··· ··· c ahb	cohilare nox	III COIG		1	